# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVA	۱L
OMB Number: 3	235-0287
Estimated average burd	en
hours per response	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	pe Response	5)									-						
1. Name and Address of Reporting Person * GALLAGHER DONALD J				2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) 1100 SUPERIOR AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 11/10/2004							X Officer (give title below) Other (specify below) Senior VP & CFO & Treasurer						
(Street) CLEVELAND, OH 44114				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Acqu					ies Acqu	ired, I	Disposed	of, or Bene	ficially Own	ied			
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)			3. Tran Code (Instr.	C	4. Securities Acqui or Disposed of (D) (Instr. 3, 4 and 5)		))	Owne Trans		Amount of Securities Beneficially byned Following Reported transaction(s)		Ownership Form:	Beneficial		
				(Month/Day/Year)		Code V		Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		11/10/2004			M		2,000	ΙΔ Ι	\$ 44.5625	2,43	31			D		
Common	Stock		11/10/2004				S	2	2,000	D S	\$ 84.27	431				D	
Common Stock									10,709				I	By VNQDC			
																	<u>(1)</u>
Reminder:	Report on a s	separate line for eac	ch class of securities  Table II	- Derivat	ive S	ecuri	ties Ac	Perso in thi displ	ons whis form ays a c	are not currently	require valid O	d to re	espond ontrol n	unless the	tion contain	ned SEC	
Reminder:  1. Title of Derivative Security (Instr. 3)	•	3. Transaction	Table II	- Derivat (e.g., pu 4. Transac Code	ive S ts, es	5. Nu of Deriv Securi (A) o Dispo	ties According to the state of	Perso in thi displ	ons who is form ays a converted on the c	are not currently of, or Ber tible secu	required valid One ficially arities)	Owner and Aderlying ties	espond control n ed Amount	unless the umber.	9. Number	of 10. Owner Form c y Deriva Securit Direct or Indi	2 1474 (9-02)  Ship of Indin Benefic Unstr. 4  (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II -  3A. Deemed Execution Date, if	- Derivat (e.g., pu 4. Transac Code	ive S tts, ex	5. Nu of Deriv Securi Acqui (A) of Dispo of (D (Instr	ties According to the state of	Persoin thi displayed displayed the person of the person o	ons while form ays a converted converted by the converted converted by the converted converted by the converted conv	are not currently of, or Ber tible secure and	required valid Oneficially arities)  7. Title of Under Security	Owner e and Aderlying ities 3 and	espond control n ed Amount	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owner Form c y Securit Direct or Indi n(s) (I)	2 1474 (9-02)  Ship of Indin Benefic Unstr. 4  (Instr. 4

### **Reporting Owners**

D 41 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GALLAGHER DONALD J 1100 SUPERIOR AVENUE CLEVELAND, OH 44114			Senior VP & CFO & Treasurer				

# **Signatures**

Donald J. Gallagher	11/12/2004
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Held for the benefit of the Reporting Person by the Cleveland-Cliffs Inc Voluntary Non-Qualified Deferred Compensation Plan (VNQDC).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.